

Church: _____ Date: _____

Minister: _____ Clerk of Session: _____

In submitting this report, we are confirming that our session has discussed the following and has arrived at the following decisions/conclusions:

1. Percentage of people in our congregation in the at-risk category: _____
2. We have determined that we will re-open beginning: _____
 - a. TIER ONE is defined as: _____
 - b. TEIR TWO is defined as: _____
3. We understand that volunteers are what is crucial for the implement of each aspect of re-opening.
4. We have consulted our insurance company concerning our liability as in applies to individuals getting COVID-19, post re-opening our church.
5. We will continue to be in communication with the Presbytery as the re-opening progresses.

PROPOSED RE-OPENING INFORMATION

ITEM	TIER ONE (Check if applies)	TIER TWO (Check if applies)	DESCRIPTION
Require Masks			
Pre-Arrange Seating			
Social Distancing Ushers			
Social Distancing Greeters			
Consider Multiple Services			
Improve Airflow			
Require Glove /Hand Sanitizers			
Disinfect Surfaces: Doors			
Designate Bulletins Area			
Continue On-Line Worship			
Conduct Attendance Tracking			
Implement Lord's Supper			
Implement Baptism			
Utilize Choir			
Implement Passing the Peace			
Implement Offering			
Implement Sunday School			
Implement Fellowship Meals			
Open Restrooms			
Open Sanctuary			
Open Offices			
Open Fellowship Hall			
Open Classrooms			